

**FEC  
FORM 3****REPORT OF RECEIPTS  
AND DISBURSEMENTS**

For An Authorized Committee

Office Use Only

1. NAME OF  
COMMITTEE (in full)USE FEC MAILING LABEL  
OR TYPE OR PRINT ▼Example: If typing, type  
over the lines

Stephen F. Lynch for Congress Committee

ADDRESS (number and street)  
▼

105 Farragut Road

☐Check if different  
than previously  
reported. (ACC)

South Boston

MA

02127

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

C00366948

3. IS THIS  
REPORT☐NEW  
(N)

OR

☒AMENDED  
(A)

MA

09

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

☒

April 15 Quarterly Report (Q1)

☐

July 15 Quarterly Report (Q2)

☐

October 15 Quarterly Report (Q3)

☐

January 31 Year-End Report (YE)

☐

Termination Report (TER)

(b) 12-Day PRE-Election Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

in the  
State of

(c) 30-Day POST-Election Report for the:

☐

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

in the  
State of

5. Covering Period

01

01

2008

through

03

31

2008

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer

Brian F Miller

Signature of Treasurer

Electronically Filed by Brian F Miller

Date

10

31

2008

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

Office  
Use  
Only**FEC FORM 3**  
(Revised 02/2003)

# SUMMARY PAGE

of Receipts and Disbursements

FEC Form 3 (Revised 02/2003)

Page 2

Write or Type Committee Name

Stephen F. Lynch for Congress Committee

Report Covering the Period:

From:

M M  
0 1D D  
0 1Y Y Y Y  
2 0 0 8

To:

M M  
0 3D D  
3 1Y Y Y Y  
2 0 0 8

	COLUMN A This Period	COLUMN B Election Cycle-to-Date
6. Net Contributions (other than loans)		
(a) Total Contributions (other than loans) (from Line 11(e)).....	117770.00	643744.60
(b) Total Contribution Refunds (from Line 20(d)).....	0.00	200.00
(c) Net Contributions (other than loans) (subtract Line 6(b) from Line 6(a)).....	117770.00	643544.60
7. Net Operating Expenditures		
(a) Total Operating Expenditures (from Line 17).....	60532.54	354740.25
(b) Total Offsets to Operating Expenditures (from Line 14).....	440.00	6177.81
(c) Net Operating Expenditures (subtract Line 7(b) from Line 7(a)).....	60092.54	348562.44
8. Cash on Hand at Close of Reporting Period (from Line 27).....	1226428.46	
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	23803.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D).....	0.00	

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463  
Toll Free 800-424-9530  
Local 202-694-1100

## DETAILED SUMMARY PAGE

of Receipts

FEC Form 3 (Revised 12/2003)

Page 3

Write or Type Committee Name

Stephen F. Lynch for Congress Committee

Report Covering the Period:

From:

M	M	D	D	Y	Y	Y	Y
0	1	0	1	2	0	0	8

To:

M	M	D	D	Y	Y	Y	Y
0	3	3	1	2	0	0	8

## I. RECEIPTS

COLUMN A  
Total This PeriodCOLUMN B  
Election Cycle-to-Date

## 11. CONTRIBUTIONS (other than loans) FROM:

(a) Individuals/Persons Other Than  
Political Committees

(i) Itemized (use Schedule A).....

61150.00

0.00

(ii) Unitemized.....

31620.00

0.00

(iii) TOTAL of contributions

from individuals..... ▶

92770.00

424471.60

0.00

0.00

(b) Political Party Committees.....

(c) Other Political Committees  
(such as PACS).....

25000.00

219273.00

0.00

0.00

(d) The Candidate.....

(e) TOTAL CONTRIBUTIONS

(other than loans)

(add Lines 11(a)(iii), (b), (c), and (d))

117770.00

643744.60

12. TRANSFERS FROM OTHER  
AUTHORIZED COMMITTEES.....

0.00

0.00

## 13. LOANS

(a) Made or Guaranteed by the  
Candidate.....

0.00

0.00

(b) All Other Loans.....

0.00

0.00

(c) TOTAL LOANS

(add Lines 13(a) and (b)).....

0.00

0.00

14. OFFSETS TO OPERATING  
EXPENDITURES  
(Refunds, Rebates, etc.).....

440.00

6177.81

## 15. OTHER RECEIPTS

(Dividends, Interest, etc.).....

14199.74

61084.49

16. TOTAL RECEIPTS (add Lines  
11(e), 12, 13(c), 14, and 15)  
(Carry Total to Line 24, page 4)..... ▶

132409.74

711006.90

# DETAILED SUMMARY PAGE of Disbursements

FEC Form 3 (Revised 02/2003)

Page 4

II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Election Cycle-to-Date
17. OPERATING EXPENDITURES.....	60532.54	354740.25
18. TRANSFERS TO OTHER AUTHORIZED COMMITTEES.....	0.00	0.00
19. LOAN REPAYMENTS:		
(a) Of Loans Made or Guaranteed by the Candidate.....	0.00	0.00
(b) Of all Other Loans.....	0.00	0.00
(c) TOTAL LOAN REPAYMENTS (add Lines 19(a) and (b)).....	0.00	0.00
20. REFUNDS OF CONTRIBUTIONS TO:		
(a) Individuals/Persons Other Than Political Committees.....	0.00	200.00
(b) Political Party Committees.....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) TOTAL CONTRIBUTION REFUNDS (add Lines 20(a), (b), and (c)).....	0.00	200.00
21. OTHER DISBURSEMENTS.....	34596.92	94467.52
22. TOTAL DISBURSEMENTS (add Lines 17, 18, 19(c), 20(d), and 21) ▶	95129.46	449407.77

## III. CASH SUMMARY

23. CASH ON HAND AT BEGINNING OF REPORTING PERIOD.....	1189148.18
24. TOTAL RECEIPTS THIS PERIOD (from Line 16, page3).....	132409.74
25. SUBTOTAL (add Line 23 and Line 24).....	1321557.92
26. TOTAL DISBURSEMENTS THIS PERIOD (from Line 22).....	95129.46
27. CASH ON HAND AT CLOSE OF REPORTING PERIOD (subtract Line 26 from Line 25).....	1226428.46

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 5 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MAUREEN P ARKLE

Mailing Address 25 Dover Rd

City

Dover

State

MA

Zip Code

02030

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation

CONSULTANT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431320

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ANTHONY ATHANAS

Mailing Address 24 Commonwealth Avenue

City

Boston

State

MA

Zip Code

02116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ANTHONY'S FINE RESTAURANTS

Occupation

EXECUTIVE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442320

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL R ATHANAS

Mailing Address 147 Front Street

City

Marblehead

State

MA

Zip Code

01945

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Anthony'S Fine Restaurants

Occupation

Ceo

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431385

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

5000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

DEAN W ATKINS

Mailing Address 348 Franklin St

City

Cambridge

State

MA

Zip Code

02139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431348

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

RICHARD K AVERY

Mailing Address 27 Geraldine Ln

City

Braintree

State

MA

Zip Code

02184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SECURITAS SECURITY

Occupation

PRESIDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431313

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JOHN LUCIANO BATTAGLINO

Mailing Address 501 Lexington St

City

Waltham

State

MA

Zip Code

02452

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BARNES & NOBEL COLLEGE BO-  
OKSTORES

Occupation

SENIOR VP

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.10432692

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 7 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

FRANCIS X BELLOTTI

Mailing Address 120 Hillside Ave

City

Quincy

State

MA

Zip Code

02170

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431351

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ALDEN J BIANCHI

Mailing Address 100 Front St

City

Worcester

State

MA

Zip Code

01608

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431354

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

RICHARD M. BIVONE

Mailing Address 128 Norman Dr

City

East Meadow

State

NY

Zip Code

11554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RMB DEVELOPMENT CONSULTAN-  
TS

Occupation

PRESIDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431301

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 8 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

PATRICK J BOWES

Mailing Address 24 Woodland Rd

City

Scituate

State

MA

Zip Code

02066

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWNOccupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431395

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

GEORGE D BROWN

Mailing Address 22 Clifton Rd

City

Wellesley

State

MA

Zip Code

02481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON COLLEGEOccupation  
PROFESSOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10432584

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

DENISE A BUCKLEY

Mailing Address 18 Tremlett Rd

City

Billerica

State

MA

Zip Code

01821

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWNOccupation  
UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431304

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

850.00

TOTAL This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 9 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

KEVIN M BURCHILL

Mailing Address 176 Cain Ave

City

Braintree

State

MA

Zip Code

02184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOURCE ONE, INC.

Occupation

DEVELOPMENT MANAGER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431309

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ANN E BURKE-TUFTS

Mailing Address 11 Blackwell St

City

Boston

State

MA

Zip Code

02122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON PUBLIC SCHOOLS

Occupation

TEACHER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441374

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL E BURNS

Mailing Address 15 Sunnybrook Ln

City

Canton

State

MA

Zip Code

02021

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431394

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 10 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JAMES J CALLANAN

Mailing Address 1 Jason Ter

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JCALPRO, INC.

Occupation

PRESIDENT-CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.10432660

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

BRIAN R CASEY

Mailing Address 24 Stiles Ter

City

Newton

State

MA

Zip Code

02459

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SOURCE ONE, INC.

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431334

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

DAVID L. CHASE

Mailing Address 2028 State Rd

City

Eliot

State

ME

Zip Code

03903

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTH POINT MARINE & INDU-  
STRIAL INC.

Occupation

SHIP REPAIR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427946

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 11 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

ALAN D CIRCEO

Mailing Address PO Box 1445

City

Boston

State

MA

Zip Code

02205

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
A.C. Cruise Line

Occupation  
Owner

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442411

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ANNE J CITRIN

Mailing Address 1 Sterlington Rd

City

Sloatsburg

State

NY

Zip Code

10974

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation  
At Home

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431292

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JACOB A CITRIN

Mailing Address 1 Sterlington Rd

City

Sloatsburg

State

NY

Zip Code

10974

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Iac

Occupation  
President

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431291

Amount of Each Receipt this Period

2300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4700.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

REDMOND L CLEVENGER

Mailing Address 31 G St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MARINE SYSTEMS CORP.

Occupation

NAVAL ARNT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10432581

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

APRIL L CONNOLLY

Mailing Address 29 Andrea Dr

City

Braintree

State

MA

Zip Code

02184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON FREIGHT TERMINALS

Occupation

BOOKKEEPER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431327

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

MICHAEL JOSEPH CONNOLLY

Mailing Address 42 Cerdan Ave

City

Boston

State

MA

Zip Code

02131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HINCKLEY, ALLEN & SNYDER

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442316

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 13 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
DONNAL CONNORS

Mailing Address PO Box 171

City State Zip Code  
Greenbush MA 02040

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON SHIP REPAIR, LLC

Occupation  
CONTRACT ADMINISTRATOR

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427938

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
WILLIAM M COWAN

Mailing Address 170 Connie Ln

City State Zip Code  
Stoughton MA 02072

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation  
ATTORNEY

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431356

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
RALPH F COX

Mailing Address 6 71st St

City State Zip Code  
Newburyport MA 01950

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NEW ENGLAND DEVELOPMENT

Occupation  
REAL ESTATE

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431337

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 14 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL F COYNE

Mailing Address 101 Sycamore St

City

Boston

State

MA

Zip Code

02131

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431409

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

CHRISTOPHER T CUDDY

Mailing Address 148 Chandler St

City

Boston

State

MA

Zip Code

02116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CBRE/WHITTIER

Occupation  
SENIOR VICE PRESIDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431310

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JOSEPH A CURNANE, II

Mailing Address 2 Hull Street CT

City

Boston

State

MA

Zip Code

02113

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON PROF. HOCKEY ASSOC.

Occupation  
EXECUTIVE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441336

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 15 / 115

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**Full Name (Last, First, Middle Initial)  
ROBERT F DAYLOR

Mailing Address 390 Hillside St

City	State	Zip Code
Milton	MA	02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TETRA TECH RIZZOOccupation  
CONSULTING ENGINEER
 Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.10442414

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**Full Name (Last, First, Middle Initial)  
MICHAEL DIBIASE

Mailing Address 59 Misty Meadow Lane

City	State	Zip Code
North Kingstown	RI	02852

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Fidelity InvestmentsOccupation  
Government Relations
 Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	8

Transaction ID: SA11AI.10427278

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**Full Name (Last, First, Middle Initial)  
STEPHEN DILEO

Mailing Address 142 Parkwood Road

City	State	Zip Code
West Islip	NY	11795

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON SHIPOccupation  
SHIP REPAIRER
 Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

 Election Cycle-to-Date ▼  
 1500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	3	/	2	0	0	8

Transaction ID: SA11AI.10427947

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

2000.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 16 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

PAUL DOHERTY

Mailing Address 25 Sarah Dr

City

Bridgewater

State

MA

Zip Code

02324

FEC ID number of contributing  
federal political committee.

C

Name of Employer

SHAWMUT WOODWORKING & SUP-  
PLY

Occupation

VP FIELD OPERATIONS

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441385

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

PAULA A. DOHERTY

Mailing Address 14 Everett St

City

Dorchester

State

MA

Zip Code

02122

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Rogerson Orthopedic

Occupation

Business Manager

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442205

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

GEORGE B DONAHUE

Mailing Address 47 Bradfield Ave

City

Boston

State

MA

Zip Code

02131

FEC ID number of contributing  
federal political committee.

C

Name of Employer

PLUMBERS & GASFITTERS LOC-  
AL 12

Occupation

BUSINNES AGENT

Receipt For:

2008

☒ Primary

☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

400.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442262

Amount of Each Receipt this Period

400.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 17 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

THOMAS DONNELLY

Mailing Address 17 Woodworth St

City

Dorchester

State

MA

Zip Code

02122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

Retired

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431473

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

MELVIN B DRAPKIN

Mailing Address 99-40 Florence St

City

Chestnut Hill

State

MA

Zip Code

02467

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATLAS MANAGEMENT GROUP

Occupation

FINANCE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441375

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

DANIEL J DRISCOLL

Mailing Address 41 Lilly Ln

City

Dedham

State

MA

Zip Code

02026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HARBOR HEALTH SERVICES

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10427284

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 18 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL F DUNN

Mailing Address 247 Peach St

City

Braintree

State

MA

Zip Code

02184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNICCO SERVICE CO.

Occupation

EXECUTIVE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	5	/	2	0	0	8

Transaction ID: SA11AI.10441338

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

PATRICIA A FAHY

Mailing Address 770 E 6th St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBCR

Occupation

CFO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

350.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431423

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

DONALD B FALVEY

Mailing Address 160 Franklin St

City

Milton

State

MA

Zip Code

02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.10442421

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

450.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 19 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

DAVID A FARRELL

Mailing Address 20 Rene Rd

City

Brockton

State

MA

Zip Code

02301

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CITY OF BOSTON

Occupation

EXECUTIVE DIRECTOR PARKING AUTHORITY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441342

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

DONNA M FARRELLY

Mailing Address 390 Commonwealth Ave

City

Boston

State

MA

Zip Code

02215

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF EMPLOYED

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.10432673

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JAMES F FEBEO, JR

Mailing Address 1 Charles St S

City

Boston

State

MA

Zip Code

02116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FIDELITY INVESTMENTS

Occupation

VICE PRESIDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10427288

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

850.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 20 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JOSEPH E FINDLEN

Mailing Address 278 Central Ave

City State Zip Code  
Dedham MA 02026

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JARVIS APPLIANCES

Occupation  
SALES

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

225.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442404

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

JOHN FISH

Mailing Address 65 Allerton Street

City State Zip Code  
Boston MA 02119

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SUFFOLK CONSTRUCTION

Occupation  
CONTRACTOR

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431303

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

DOUGLAS B FISHER

Mailing Address 64 Clubhouse Dr

City State Zip Code  
Hingham MA 02043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FIDELITY INVESTMENTS

Occupation  
ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10427273

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 21 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
NEIL F FITZPATRICK

Mailing Address 25 Dover Rd

City State Zip Code  
Dover MA 02030

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BOSTON FREIGHT TERMINALS

Occupation  
TRANSPORTATION MANAGER

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2008

Transaction ID: SA11AI.10431294

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
MARY T FOLEY

Mailing Address 455 E 8th St

City State Zip Code  
Boston MA 02127

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MASSACHUSETTS GENERAL HOS-  
PITAL

Occupation  
MRI RESEARCH OPERATIONS MANAGER

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2008

Transaction ID: SA11AI.10431417

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
ANDREW M FRASER

Mailing Address 408 Ipswich Rd

City State Zip Code  
Boxford MA 01921

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
COMMODORE BUILDERS

Occupation  
VICE PRESIDENT

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
03 / 14 / 2008

Transaction ID: SA11AI.10431305

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 22 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL N FRAZIS

Mailing Address 3933 Mimosa Pl

City

Palm Harbor

State

FL

Zip Code

34685

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FRAZIS ELECTRICAL

Occupation

ENGINEER/PRESIDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427950

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ERIC J FREEMAN

Mailing Address 11 Bird St

City

Needham

State

MA

Zip Code

02492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431359

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM H GALLAGHER

Mailing Address PO Box 1554

City

North Falmouth

State

MA

Zip Code

02556

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Atlantic Data Services Inc

Occupation

Ceo

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10444292

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 23 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

PAUL T GANNON

Mailing Address 17 Standish Rd

City

Milton

State

MA

Zip Code

02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10432575

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ROBERT M GAULT

Mailing Address 106 Berkeley St

City

Newton

State

MA

Zip Code

02465

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation  
ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431361

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

THOMAS I GAVAGHAN

Mailing Address 208 L St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MASSACHUSETTS TRIAL COURT

Occupation  
ENGINEER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441339

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 24 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JAMES J GOFF

Mailing Address 354 Blue Hill Ave

City

Milton

State

MA

Zip Code

02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KEYSPAN ENERGY DELIVERY

Occupation

DISTRICT INSPECTOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10427287

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

THOMAS S GUNNING

Mailing Address 4 Evergreen Trl

City

Milton

State

MA

Zip Code

02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431401

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

LOUIS S HADAYA

Mailing Address 3 Carriage Ln

City

Walpole

State

MA

Zip Code

02081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
HADCO CONTRACTING

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431317

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 25 / 115

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

DANIEL P HALEY

Mailing Address 11 Willowgate Rise

City

Holliston

State

MA

Zip Code

01746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCDERMOTT, WILL & EMERY

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431298

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

HERBERT J HAMELINE

Mailing Address 123 Otis St

City

Cambridge

State

MA

Zip Code

02141

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431364

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

THOMAS T HANTAKAS, SR

Mailing Address 109 Salmon St

City

West Roxbury

State

MA

Zip Code

02132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

RETIRED

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	0	/	2	0	0	8

Transaction ID: SA11AI.10432655

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 26 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
THOMAS T. HANTAKAS, JR.

Mailing Address 109 Salman St

City State Zip Code  
West Roxbury MA 02132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 20 / 2008

Transaction ID: SA11AI.10432657

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
THOMAS T. HANTAKAS, JR.

Mailing Address 109 Salman St

City State Zip Code  
West Roxbury MA 02132

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
350.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2008

Transaction ID: SA11AI.10442312

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
ROBERT A HAVERN, III

Mailing Address 35 Bartlett Ave

City State Zip Code  
Arlington MA 02476

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ML STRATEGIES

Occupation  
PRESIDENT OF GOVERNMENT RELATIONS

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2008

Transaction ID: SA11AI.10431366

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

650.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 27 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
ROBERT EMMET HAYES

Mailing Address 6 Danecca Dr

City State Zip Code  
Whitman MA 02382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAYTON CONSTRUCTION

Occupation  
VICE PRESIDENT

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 06 / 2008

Transaction ID: SA11AI.10430657

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
ANDREW W HOAR

Mailing Address 129 Abbott Rd

City State Zip Code  
Wellesley MA 02481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CB RICHARD ELLIS PARTNERS

Occupation  
REAL ESTATE

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2008

Transaction ID: SA11AI.10431311

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
RYAN EVERITT HUTCHINS

Mailing Address 28 Vinton St

City State Zip Code  
Boston MA 02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GILBANE BUILDING CO

Occupation  
EXECUTIVE

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2008

Transaction ID: SA11AI.10431369

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 28 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

ANTHONY J ILACQUA

Mailing Address 209 Tudor St

City

South Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation

GARAGE/TAXI

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10432594

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ANTHONY JAMES ILACQUA

Mailing Address 10 Hilltop St

City

Milton

State

MA

Zip Code

02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TUDOR GARAGE

Occupation

TAXI FLEET OWNER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10432596

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

GEORGE ITZ

Mailing Address 812 Middle St

City

Weymouth

State

MA

Zip Code

02188

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON FREIGHT TERMINALS

Occupation

MANAGER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431323

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 29 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM L JACOBSON

Mailing Address 34 Burr Dr

City

Needham

State

MA

Zip Code

02492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JACOBSON FLORAL SUPPLY,  
INC.

Occupation

SALES

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	4		2	0	0	8

Transaction ID: SA11AI.10431319

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

ROBERT S KARAM

Mailing Address 456 Rock St

City

Fall River

State

MA

Zip Code

02720

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KARAM FINANCIAL GROUP

Occupation

PRESIDENT &amp; CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	0		2	0	0	8

Transaction ID: SA11AI.10432647

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

MICHAEL C KELLY

Mailing Address 40 Morrison Rd

City

Braintree

State

MA

Zip Code

02184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBTA

Occupation

IRONWORKER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	8

Transaction ID: SA11AI.10442187

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 30 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

WILLIAM F KEOUGH, JR

Mailing Address 661 E 4th St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBTA

Occupation

ELECTRICIAN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442423

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

FRANK H. KERNEY, JR.

Mailing Address 25 Jared CT

City

Watchung

State

NJ

Zip Code

07069

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
KERNEY SERVICE GROUP, INC.

Occupation

OWNER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427951

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

ANASTASIOS KESSARIS

Mailing Address 48 Spring St

City

Hanson

State

MA

Zip Code

02341

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.10430659

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 31 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

SHIRLEY ANNE M LAMPRON

Mailing Address 4 Burnham Pl

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
WHITE MOUNTAINS CAPITAL,  
INC.

Occupation

DIRECTOR OF ACCOUNTING POLICY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441386

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ROBERT F LARKIN, JR

Mailing Address 90 Fair Oaks Park

City

Needham

State

MA

Zip Code

02492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SENIOR LIVING RESIDENCES,  
LLC

Occupation

EXECUTIVE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442422

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

MARY P LENTINI

Mailing Address 796 E 6th St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON FREIGHT TERMINALS

Occupation

ACCOUNTANT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431325

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 32 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JAMES G LEONARD

Mailing Address 49 Kenney St

City

Needham

State

MA

Zip Code

02492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
EAST WEST BASIKS (H.K.)  
LTD

Occupation

DIRECTOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431415

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

LAUREN M LESINSKI

Mailing Address 72 Hillside St

City

Rowley

State

MA

Zip Code

01969

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ATC ASSOCIATES, INC.

Occupation

SR. PROJECT MGR ENVIRONMENTAL CONSULTANT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431300

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

STUART B LEVY

Mailing Address 144 Warren Ave

City

Boston

State

MA

Zip Code

02116

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TUFTS UNIVERSITY

Occupation

PHYSICIAN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442408

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 33 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL P LYDON

Mailing Address 254 Church St

City

Pembroke

State

MA

Zip Code

02359

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Michael'S Salon

Occupation

Stylist

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431476

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

PENNY MAGGIO

Mailing Address 100 Maiden Ln

City

New York

State

NY

Zip Code

10038

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
CARGO VENTURES LLC

Occupation

DIRECTOR OF SPECIAL PROJECTS

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431293

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JOHN J MAHONEY

Mailing Address 2 Philip Rd

City

Walpole

State

MA

Zip Code

02081

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431396

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 34 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JOHN P MANNING

Mailing Address 1 Boston Pl

City

Boston

State

MA

Zip Code

02108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON CAPITAL

Occupation

PRESIDENT & CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427937

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

TOROS M MARKARIAN

Mailing Address 1748 Columbia Rd

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
METRO ENERGY

Occupation

OWNER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442212

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

PATRICIA A MCDONNELL

Mailing Address 109 O St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MELLON BANK

Occupation

BANKER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441322

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 35 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
MICHELLE A MCDONOUGH

Mailing Address 456 E 7th St

City State Zip Code  
Boston MA 02127

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
BC HIGH SCHOOL

Occupation  
COOK

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.10432635

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
RICHARD B MCDONOUGH

Mailing Address 56 Columbus Ave

City State Zip Code  
Braintree MA 02184

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
NORFOLK COUNTY SHERIFF

Occupation  
ASST DEPUTY SUPERINTENDENT

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442412

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
JOHN P MCGAHAN

Mailing Address 5 Gates St

City State Zip Code  
Boston MA 02127

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
GAVIN FOUNDATION

Occupation  
EXECUTIVE DIRECTOR

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y  
 0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442185

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 36 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JOHN J MCGLYNN

Mailing Address 57 Wharf Street

City

Salem

State

MA

Zip Code

01970

FEC ID number of contributing  
federal political committee.

C

Name of Employer

LAW OFFICES OF JACK MCGLYNN

Occupation

LOBBYIST

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442428

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ROBERT F MCSWEENEY

Mailing Address 24 Lantern Rd

City

Holbrook

State

MA

Zip Code

02343

FEC ID number of contributing  
federal political committee.

C

Name of Employer

STOP 'N SHOP

Occupation

DRIVER

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.10432652

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

THOMAS M MELVIN

Mailing Address 92 Taxiera Rd

City

Stoughton

State

MA

Zip Code

02072

FEC ID number of contributing  
federal political committee.

C

Name of Employer

HARVARD UNIVERSITY

Occupation

ENGINEER

Receipt For: 2008

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431430

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1250.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 37 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

RICHARD G MINTZ

Mailing Address 63 Atlantic Ave

City

Boston

State

MA

Zip Code

02110

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ, LEVIN

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431381

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

LORETTA P MIRISOLA

Mailing Address 105 Farragut Rd

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.10432654

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JOSEPH M MORAN

Mailing Address 139 Audubon Ave

City

Braintree

State

MA

Zip Code

02184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
COMMONWEALTH OF MA

Occupation

COMPLIANCE OFFICER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431469

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 38 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JOHN J MORIARTY, JR

Mailing Address 140 Fort Hill St

City

Hingham

State

MA

Zip Code

02043

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SHAWMUT DESIGN

Occupation  
DIRECTOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442263

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

PATRICE C NICHOLAS

Mailing Address 70 Plymouth Ave

City

Milton

State

MA

Zip Code

02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MASS GENERAL HOSPITAL

Occupation  
PROFESSOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431382

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

HARRY NICHOLSEN

Mailing Address 774 Barkley Avenue

City

East Meadow

State

NY

Zip Code

11554

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON SHIP REPAIR

Occupation  
ACCOUNTANT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427944

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1600.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 39 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

STEPHEN F NOLAN, III

Mailing Address 8 Reardon Way

City

North Easton

State

MA

Zip Code

02356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TOWN OF EASTON

Occupation

DIRECTOR OF VETERAN SERVICES

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441343

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

STEPHEN M NORTON

Mailing Address 54 Argyle Rd

City

Braintree

State

MA

Zip Code

02184

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
E.D.I.C.

Occupation

MAINTENANCE MECHANIC

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441368

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

MARIE A. O'TOOLE

Mailing Address 405 Oak St

City

Westwood

State

MA

Zip Code

02090

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10444284

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 40 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**Full Name (Last, First, Middle Initial)  
CHRISTOPHER ODDLEIFSON

Mailing Address 69 Summer St

City State Zip Code  
Cohasset MA 02025
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROCKLAND TRUST CO.Occupation  
PRESIDENT
Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441378

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**Full Name (Last, First, Middle Initial)  
JOHN H OLEARY

Mailing Address 60 P St

City State Zip Code  
Boston MA 02127
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MCCAOccupation  
BUILDING ENGINEER
Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431454

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**Full Name (Last, First, Middle Initial)  
A LEONARD OLSON

Mailing Address 41 Hawthorne Rd

City State Zip Code  
Holbrook MA 02343
FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON SHIP REPAIROccupation  
VP OPERATIONS
Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427940

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

750.00

TOTAL This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 41 / 115

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

ROBERT PACITTI

Mailing Address 613 E 6th St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MBTA

Occupation

TRACK LABORER

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.10442410

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

KEVIN A PALLOTTA

Mailing Address 34 Hichborn St

City

Boston

State

MA

Zip Code

02135

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTHEAST RESOURCES

Occupation

PRESIDENT

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	3	/	2	0	0	8

Transaction ID: SA11AI.10427945

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

CHARLES L PETRI

Mailing Address 42 Grove St

City

Winchester

State

MA

Zip Code

01890

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NO. 9 PARK

Occupation

CHEF

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10432578

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1750.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 42 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
DOROTHY PIZZELLA

Mailing Address 179 Clinton Rd

City State Zip Code  
Brookline MA 02445

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
COMMONWEALTH OF MASSACHUSETTS

Occupation  
DIRECTOR

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10427272

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
PETROS POLYZOS

Mailing Address 141 Manthorne Rd

City State Zip Code  
Boston MA 02132

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
UNKNOWN

Occupation  
RETIRED

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441365

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
JOHN R POMERANCE

Mailing Address 21 Bogle St

City State Zip Code  
Weston MA 02493

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
MINTZ LEVIN

Occupation  
ATTORNEY

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431371

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1550.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 43 / 115

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

R ROBERT POPEO

Mailing Address 1200 Webster St

City

Needham

State

MA

Zip Code

02492

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN COHN FERRIS  
& POPEOOccupation  
ATTORNEY

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431372

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

MICHAEL J. POSILLICO

Mailing Address 1610 New Highway

City

Farmingdale

State

NY

Zip Code

11735

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BLUE WATER ENVIRONMENTALOccupation  
PRINCIPAL

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431342

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

ELAINE R PULGINI

Mailing Address 10 Warren Park

City

Boston

State

MA

Zip Code

02136

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
LAW OFFICES OF JOSEPH L.  
PULGINI PCOccupation  
ATTORNEY

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.10444282

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 44 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JOHN R REGIER

Mailing Address 89 Farnham St

City

Belmont

State

MA

Zip Code

02478

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation

LAWYER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431373

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

JEFFREY S ROBBINS

Mailing Address 76 Shade St

City

Lexington

State

MA

Zip Code

02421

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MINTZ LEVIN

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431374

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JAMES P ROBERTSON, JR

Mailing Address 17 Woodworth St.

City

Dorchester

State

MA

Zip Code

02122

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Centre Street Realty

Occupation

Investor

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431474

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 45 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

RICHARD S ROSEN

Mailing Address 5 Danecca Dr

City

Whitman

State

MA

Zip Code

02382

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROSEN MALTY

Occupation

REAL ESTATE BROKER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: SA11AI.10430660

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ROBERT J RYAN

Mailing Address 2 Hewins Farm Rd

City

Wellesley

State

MA

Zip Code

02481

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ML STRATEGIES

Occupation

ATTORNEY

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431376

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

RALPH J SALVUCCI, JR

Mailing Address 4 Valley View Rd

City

Waltham

State

MA

Zip Code

02452

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SALVUCCI ENGINEERING

Occupation

OPERATING ENGINEER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431308

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 46 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

RALPH J SALVUCCI, JR

Mailing Address 4 Valley View Rd

City

Waltham

State

MA

Zip Code

02452

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SALVUCCI ENGINEERING

Occupation

OPERATING ENGINEER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442277

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

STEPHANIE A SALVUCCI

Mailing Address 4 Valley View Rd

City

Waltham

State

MA

Zip Code

02452

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RED OAK LANDSCAPING, INC.

Occupation

OWNER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431307

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

STEPHANIE A SALVUCCI

Mailing Address 4 Valley View Rd

City

Waltham

State

MA

Zip Code

02452

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RED OAK LANDSCAPING, INC.

Occupation

OWNER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442278

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 47 / 115

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

DOMENIC R. SERRA

Mailing Address 49 Goodnow Ln

City

Framingham

State

MA

Zip Code

01702

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431295

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

JONATHAN W. SERRA

Mailing Address 17b Ocean Pier Ave

City

Revere

State

MA

Zip Code

02151

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MEDIA VISION

Occupation

PRESIDENT

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431296

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

WILLIAM H SHAEVEL

Mailing Address 241 Perkins St

City

Boston

State

MA

Zip Code

02130

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SHAEVEL & KREMS

Occupation

MANAGING PARTNER

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

300.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: SA11AI.10444289

Amount of Each Receipt this Period

100.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

600.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 48 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL SHEERAN

Mailing Address 379 Cross St

City

Norwell

State

MA

Zip Code

02061

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
FIESTA SHOWS

Occupation

CARNIVAL OPERATOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442266

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

MACKENZIE SMITH

Mailing Address 154 Elm St

City

North Easton

State

MA

Zip Code

02356

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10432606

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

EDWARD W SNYDER

Mailing Address 133 Natures Isle Drive

City

Ponte Vedra Beach

State

FL

Zip Code

32082

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON SHIP REPAIR

Occupation

PRESIDENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427942

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 49 / 115

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

DAVID SOLOMON

Mailing Address 2 Cross St

City

Foxborough

State

MA

Zip Code

02035

FEC ID number of contributing  
federal political committee.

C

Name of Employer

BOSTON FREIGHT TERMINALS

Occupation

GENERAL MANAGER

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431316

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**B.**

Full Name (Last, First, Middle Initial)

CHAE W SONG

Mailing Address 214-18 41st Ave

City

Bayside

State

NY

Zip Code

11361

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNKNOWN

Occupation

UNKNOWN

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	3	/	2	0	0	8

Transaction ID: SA11AI.10427948

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)**C.**

Full Name (Last, First, Middle Initial)

CHAE W SONG

Mailing Address 214-18 41st Ave

City

Bayside

State

NY

Zip Code

11361

FEC ID number of contributing  
federal political committee.

C

Name of Employer

UNKNOWN

Occupation

UNKNOWN

Receipt For:

2008

☒

Primary

☐

General

☐

Other (specify) ▼

Election Cycle-to-Date ▼

0.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	1	/	2	0	0	8

Transaction ID: SA11AI.10444823

Amount of Each Receipt this Period

-1000.00

Returned check

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 50 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

SANG YAE SONG

Mailing Address 4 Hillsboro St

City

Quincy

State

MA

Zip Code

02169

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNITED COATING CORP.

Occupation  
HANDLER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427949

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

JAMES M STAVIS

Mailing Address 200 Sagamore St

City

South Hamilton

State

MA

Zip Code

01982

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NORTH COAST SEAFOODS

Occupation  
SALES

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431405

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

WILLIAM G SUPREY

Mailing Address 865 E 4th St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation  
RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

750.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441377

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 51 / 115

(check only one)

<input checked="" type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14
<input type="checkbox"/> 15			

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MICHAEL N TAGLICH

Mailing Address 98 Bay St

City

Sag Harbor

State

NY

Zip Code

11963

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
TAGLICH BROTHERSOccupation  
BROKER

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	3	/	2	0	0	8

Transaction ID: SA11AI.10427941

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

ROBERT F. TAGLICH

Mailing Address 405 Lexington Ave

City

New York

State

NY

Zip Code

10174

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
Taglich Brothers, Inc.Occupation  
Executive

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	8

Transaction ID: SA11AI.10427964

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

FRANCIS J TARANTINO

Mailing Address 100 Atwell Cir

City

Marshfield

State

MA

Zip Code

02050

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
MARSHFIELD COUNTRY CLUBOccupation  
ASSISTANT SUPERINTENDENT

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA11AI.10431425

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1250.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 52 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JAMES P TENANTY, III

Mailing Address 23 McKinley Rd

City

Norwood

State

MA

Zip Code

02062

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
USPS

Occupation

MAIL PROCESSOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11AI.10442213

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

AGNES C THORNTON

Mailing Address 14 Perkins Ave

City

Reading

State

MA

Zip Code

01867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431431

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

STEPHEN P TOCCO

Mailing Address 11 Gregory Ln

City

Reading

State

MA

Zip Code

01867

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ML STRATEGIES

Occupation

CEO

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

550.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11AI.10431379

Amount of Each Receipt this Period

300.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 53 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

JOHN W TOULOPOULOS

Mailing Address 76 Putnam Ave

City

Cambridge

State

MA

Zip Code

02139

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
JVT REALTY TRUST

Occupation

RE MANAGEMENT/DEVELOPMENT

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427943

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

DONALD E TRUDEAU

Mailing Address 15 Curtis Cir

City

Weymouth

State

MA

Zip Code

02189

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
BOSTON SHIP REPAIR

Occupation

ENGINEER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11AI.10427939

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

RICHARD J VAUGHAN

Mailing Address 61 Wendell Park

City

Milton

State

MA

Zip Code

02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Vaughan Co., Inc.

Occupation

Self Employed

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441387

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 54 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

RICHARD J VAUGHAN

Mailing Address 61 Wendell Park

City

Milton

State

MA

Zip Code

02186

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
The Vaughan Co., Inc.

Occupation

Self Employed

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 31 / 2008

Transaction ID: SA11AI.10442322

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

ALBERT J WELCH, III

Mailing Address 628 Fiske St

City

Holliston

State

MA

Zip Code

01746

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NOMANTUM CORP.

Occupation

CONTRACTOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2008

Transaction ID: SA11AI.10431306

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

CARMELA A WHALEN

Mailing Address 796 E 6th St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
GEO TRANS

Occupation

OFFICE MANAGER

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
03 / 14 / 2008

Transaction ID: SA11AI.10431322

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 55 / 115

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

ROBERT F WHITE

Mailing Address 25 Channel Ctr St

City

Boston

State

MA

Zip Code

02210

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ROBERT WHITE ASSOC

Occupation  
LOBBYIST

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11AI.10427283

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

KATHLEEN T YOUNG

Mailing Address 63 Chestnut St

City

Boston

State

MA

Zip Code

02108

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
ALLIANCE FOR PRUDENT USE  
OF ANTIBIOTIC

Occupation  
EXECUTIVE DIRECTOR

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

600.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 0 / 2 0 0 8

Transaction ID: SA11AI.10432661

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

TIA ZAFERAKIS

Mailing Address 824 E 3rd St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF-EMPLOYED

Occupation  
REAL ESTATE

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11AI.10441350

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1750.00

**TOTAL** This Period (last page this line number only) .....

61150.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 56 / 115

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
AMERICAN HOSPITAL ASSOCIATION, PAC

Mailing Address 325 Seventh Street, N. W.

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee. **C** C00106146

Name of Employer Occupation  
UNKNOWN UNKNOWN

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
2000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11C.10427285

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
CITIZENS FINANCIAL GROUP INC PAC

Mailing Address One Citizens Plaza

City State Zip Code  
Providence RI 02903

FEC ID number of contributing  
federal political committee. **C** C00307249

Name of Employer Occupation  
UNKNOWN UNKNOWN

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11C.10427275

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
DLA Piper PAC

Mailing Address 500 8th St NW

City State Zip Code  
Washington DC 20004

FEC ID number of contributing  
federal political committee. **C** C00151340

Name of Employer Occupation  
UNKNOWN UNKNOWN

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 3 / 2 0 0 8

Transaction ID: SA11C.10427936

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 57 / 115

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

EDO Corporation PAC

Mailing Address 241 18th St South

City

Arlington

State

VA

Zip Code

22202

FEC ID number of contributing  
federal political committee.

**C** C00329318

Name of Employer  
UNKNOWN

Occupation  
UNKNOWN

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 2 5 / 2 0 0 8

Transaction ID: SA11C.10441383

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

FMR CORP POLITICAL ACTION COMMITTEE

Mailing Address 82 Devonshire Street

City

Boston

State

MA

Zip Code

02109

FEC ID number of contributing  
federal political committee.

**C** C00215046

Name of Employer  
UNKNOWN

Occupation  
UNKNOWN

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

7500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11C.10427277

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

JOHN HANCOCK FINANCIAL SERVICES PAC

Mailing Address 200 Clarendon St

City

Boston

State

MA

Zip Code

02116

FEC ID number of contributing  
federal political committee.

**C** C00137265

Name of Employer  
UNKNOWN

Occupation  
UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

3000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11C.10427276

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

6500.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 58 / 115

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
LIBERTY MUTUAL INSURANCE COMPANY, PAC

Mailing Address 175 Berkley Street

City State Zip Code  
Boston MA 02116

FEC ID number of contributing  
federal political committee. **C** C00171843

Name of Employer  
UNKNOWN Occupation  
UNKNOWN

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
5000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11C.10427271

Amount of Each Receipt this Period

2500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
PCIPAC

Mailing Address 444 North Capitol St NW

City State Zip Code  
Washington DC 20001

FEC ID number of contributing  
federal political committee. **C** C00066472

Name of Employer  
UNKNOWN Occupation  
UNKNOWN

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 4 / 2 0 0 8

Transaction ID: SA11C.10431290

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
PMA Group PAC

Mailing Address 1755 Jefferson Davis Hwy

City State Zip Code  
Arlington VA 22202

FEC ID number of contributing  
federal political committee. **C** C00280321

Name of Employer  
UNKNOWN Occupation  
UNKNOWN

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
1500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA11C.10442429

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

4000.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 59 / 115

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
STATE STREET BANK AND TRUST COMPANY PAC

Mailing Address PO Box 5351

City State Zip Code  
Boston MA 02111

FEC ID number of contributing  
federal political committee.

**C** C00072751

Name of Employer  
UNKNOWN

Occupation  
UNKNOWN

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 2000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11C.10427274

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)  
UNITED FOOD AND COMMERCIAL WORKERS

Mailing Address 1775 K Street NW, 7th Floor

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00002766

Name of Employer  
UNKNOWN

Occupation  
UNKNOWN

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 5000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11C.10427279

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)  
UNITED FOOD AND COMMERCIAL WORKERS

Mailing Address 1775 K Street NW, 7th Floor

City State Zip Code  
Washington DC 20006

FEC ID number of contributing  
federal political committee.

**C** C00002766

Name of Employer  
UNKNOWN

Occupation  
UNKNOWN

Receipt For: 2008  
☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 8000.00

Date of Receipt

M M / D D / Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA11C.10427280

Amount of Each Receipt this Period

3000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

7000.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
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FOR LINE NUMBER: PAGE 60 / 115

(check only one)

☐ 11a ☐ 11b ☒ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

UPS PAC

Mailing Address 55 Glenlake Parkway N.E.

City

Atlanta

State

GA

Zip Code

30328

FEC ID number of contributing  
federal political committee.**C** C00064766Name of Employer  
UNKNOWNOccupation  
UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: SA11C.10442321

Amount of Each Receipt this Period

52.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

UPS PAC

Mailing Address 55 Glenlake Parkway N.E.

City

Atlanta

State

GA

Zip Code

30328

FEC ID number of contributing  
federal political committee.**C** C00064766Name of Employer  
UNKNOWNOccupation  
UNKNOWN

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5448.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Transaction ID: SA11C.10445228

Amount of Each Receipt this Period

448.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

UniteHere TIP Campaign Committee

Mailing Address 275 7th Ave

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing  
federal political committee.**C** C00004861Name of Employer  
UNKNOWNOccupation  
UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

5000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	3	0	/	2	0	0	8

Transaction ID: SA11C.10427281

Amount of Each Receipt this Period

2000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**SUBTOTAL** of Receipts This Page (optional) .....

2500.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 61 / 115

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input checked="" type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input type="checkbox"/> 14 <input type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

UniteHere TIP Campaign Committee

Mailing Address 275 7th Ave

City

New York

State

NY

Zip Code

10001

FEC ID number of contributing  
federal political committee.**C** C00004861Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☐ Primary ☒ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

6000.00

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	0	8

Transaction ID: SA11C.10427282

Amount of Each Receipt this Period

1000.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

25000.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 62 / 115

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MARGARET M LYNCH

Mailing Address 55 G St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAYMENT FOR PERSONAL

Occupation

USE OF CAMPAIGN VEH.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1870.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA14.10427291

Amount of Each Receipt this Period

110.00

Use of campaign vehicle

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

MARGARET M LYNCH

Mailing Address 55 G St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAYMENT FOR PERSONAL

Occupation

USE OF CAMPAIGN VEH.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

1980.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 1 / 2 0 0 8

Transaction ID: SA14.10427311

Amount of Each Receipt this Period

110.00

use of campaign vehicle

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

MARGARET M LYNCH

Mailing Address 55 G St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAYMENT FOR PERSONAL

Occupation

USE OF CAMPAIGN VEH.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2090.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 9 / 2 0 0 8

Transaction ID: SA14.10430151

Amount of Each Receipt this Period

110.00

use of campaign vehicle

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

330.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 63 / 115

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☒ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MARGARET M LYNCH

Mailing Address 55 G St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
PAYMENT FOR PERSONAL

Occupation

USE OF CAMPAIGN VEH.

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

2200.00

Date of Receipt

M M / D D / Y Y Y Y  
0 3 / 3 1 / 2 0 0 8

Transaction ID: SA14.10442167

Amount of Each Receipt this Period

110.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

110.00

**TOTAL** This Period (last page this line number only) .....

440.00

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 64 / 115

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

CITIZENS BANK

Mailing Address PO Box 789

City

Providence

State

RI

Zip Code

02901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

334.91

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 1 6 / 2 0 0 8

Transaction ID: SA15.10444383

Amount of Each Receipt this Period

334.91

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**B.**

Full Name (Last, First, Middle Initial)

CITIZENS BANK

Mailing Address PO Box 789

City

Providence

State

RI

Zip Code

02901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

669.87

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 1 6 / 2 0 0 8

Transaction ID: SA15.10444384

Amount of Each Receipt this Period

334.96

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**C.**

Full Name (Last, First, Middle Initial)

CITIZENS BANK

Mailing Address PO Box 789

City

Providence

State

RI

Zip Code

02901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

10646.65

Date of Receipt

M M / D D / Y Y Y Y Y  
0 2 / 2 1 / 2 0 0 8

Transaction ID: SA15.10444385

Amount of Each Receipt this Period

9976.78

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

10646.65

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 65 / 115

(check only one)

☐ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☒ 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

A.

Full Name (Last, First, Middle Initial)

CITIZENS BANK

Mailing Address PO Box 789

City

Providence

State

RI

Zip Code

02901

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

11105.39

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 1 6 / 2 0 0 8

Transaction ID: SA15.10444386

Amount of Each Receipt this Period

458.74

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

B.

Full Name (Last, First, Middle Initial)

DANIEL J HURLEY

Mailing Address 76 G St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

13500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 1 / 3 0 / 2 0 0 8

Transaction ID: SA15.10427270

Amount of Each Receipt this Period

1500.00

Repayment of embezzled funds

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

C.

Full Name (Last, First, Middle Initial)

DANIEL J HURLEY

Mailing Address 76 G St

City

Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

15000.00

Date of Receipt

M M / D D / Y Y Y Y Y  
0 3 / 0 6 / 2 0 0 8

Transaction ID: SA15.10430637

Amount of Each Receipt this Period

1500.00

Repayment of embezzled funds

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

3458.74

TOTAL This Period (last page this line number only) .....

**SCHEDULE A (FEC Form 3 )  
ITEMIZED RECEIPTS**Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 66 / 115

(check only one)

<input type="checkbox"/> 11a	<input type="checkbox"/> 11b	<input type="checkbox"/> 11c	<input type="checkbox"/> 11d
<input type="checkbox"/> 12	<input type="checkbox"/> 13a	<input type="checkbox"/> 13b	<input checked="" type="checkbox"/> 15

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

MT. WASHINGTON BANK

Mailing Address 708 East Broadway

City

South Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

667.80

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	4	/	2	0	0	8

Transaction ID: SA15.10444389

Amount of Each Receipt this Period

42.73

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**B.**

Full Name (Last, First, Middle Initial)

MT. WASHINGTON BANK

Mailing Address 708 East Broadway

City

South Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

669.27

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	4	/	2	0	0	8

Transaction ID: SA15.10444388

Amount of Each Receipt this Period

1.47

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)
**C.**

Full Name (Last, First, Middle Initial)

MT. WASHINGTON BANK

Mailing Address 708 East Broadway

City

South Boston

State

MA

Zip Code

02127

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
UNKNOWN

Occupation

UNKNOWN

Receipt For: 2008

☒ Primary
 ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼

719.42

Date of Receipt

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	1	4	/	2	0	0	8

Transaction ID: SA15.10444387

Amount of Each Receipt this Period

50.15

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

SUBTOTAL of Receipts This Page (optional) .....

94.35

TOTAL This Period (last page this line number only) .....

14199.74

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 67 / 115

<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

AT &amp; T

Mailing Address PO Box 536216

City  
AtlantaState  
GAZip Code  
30353Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.108939

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	8

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

AT &amp; T

Mailing Address PO Box 536216

City  
AtlantaState  
GAZip Code  
30353Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.108940

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	8

Amount of Each Disbursement this Period

137.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**

Full Name (Last, First, Middle Initial)

AT &amp; T

Mailing Address PO Box 536216

City  
AtlantaState  
GAZip Code  
30353Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.108941

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	2	8	/	2	0	0	8

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

237.51

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) AT & T Mailing Address PO Box 536216	<b>Transaction ID:</b> SB17.108942 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 8 / 2 0 0 8</div> </div>
City Atlanta State GA Zip Code 30353 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>50.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) AT & T Mailing Address PO Box 536216 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108943 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>232.62</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) AT & T Mailing Address PO Box 536216 City Atlanta State GA Zip Code 30353 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108944 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>50.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**332.62**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

AT & T

Mailing Address PO Box 536216

City  
Atlanta

State  
GA

Zip Code  
30353

Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108945

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

AT & T

Mailing Address PO Box 536216

City  
Atlanta

State  
GA

Zip Code  
30353

Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108946

Date of Disbursement

/   /

Amount of Each Disbursement this Period

134.01

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

AT & T

Mailing Address PO Box 536216

City  
Atlanta

State  
GA

Zip Code  
30353

Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108947

Date of Disbursement

/   /

Amount of Each Disbursement this Period

50.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

234.01

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) AT & T Mailing Address PO Box 536216	<b>Transaction ID:</b> SB17.108948 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div>
City Atlanta State GA Zip Code 30353 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>50.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270 City Newark State NJ Zip Code 07101 Purpose of Disbursement credit card statement (see memo) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.109125 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>370.87</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Castle Self Storage Mailing Address 39 Old Colony Ave City South Boston State MA Zip Code 02127 Purpose of Disbursement credit card - Storage expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.109125.3 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>204.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**420.87**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270	<b>Transaction ID:</b> SB17.109079 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 0 / 2 0 0 8</div> </div>
City Newark State NJ Zip Code 07101 Purpose of Disbursement credit card statement (see memo) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div>344.95</div> <div>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</div> </div>
<b>B.</b> Full Name (Last, First, Middle Initial) Castle Self Storage Mailing Address 39 Old Colony Ave City South Boston State MA Zip Code 02127 Purpose of Disbursement credit card - Storage expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109079.2 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div>204.00</div> <div>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</div> </div> <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270 City Newark State NJ Zip Code 07101 Purpose of Disbursement credit card statement (see memo) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109084 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div>1221.87</div> <div>Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53</div> </div>

**SUBTOTAL** of Disbursements This Page (optional) .....

**1566.82**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☒ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Intercontinental Mailing Address 510 Atlantic Ave	<b>Transaction ID:</b> SB17.109084.2 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div>
City State Zip Code Boston MA 02210 Purpose of Disbursement credit card - Catering expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>887.52</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) Castle Self Storage Mailing Address 39 Old Colony Ave	<b>Transaction ID:</b> SB17.109084.4 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>204.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) American Express Mailing Address PO Box 1270	<b>Transaction ID:</b> SB17.109090 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2575.62</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**2575.62**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
 Postmaster Boston

Mailing Address Fort Point Station

City Boston State MA Zip Code 02205

Purpose of Disbursement  
 credit card - Postage expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109090.4  
 Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**[MEMO ITEM]**

**B.**

Full Name (Last, First, Middle Initial)  
 Castle Self Storage

Mailing Address 39 Old Colony Ave

City South Boston State MA Zip Code 02127

Purpose of Disbursement  
 credit card - Storage expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109090.5  
 Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
 Bonaiuto, Sarah

Mailing Address 15 Lexington Street #3

City Charlestown State MA Zip Code 02129

Purpose of Disbursement  
 Travel reimbursement

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.108951  
 Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Boston Herald Mailing Address PO Box 981068	<b>Transaction ID:</b> SB17.108952 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 3 0 / 2 0 0 8</div> </div>
City State Zip Code Boston MA 02298 Purpose of Disbursement Subscription expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>25.04</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Boston Herald Mailing Address PO Box 981068 City State Zip Code Boston MA 02298 Purpose of Disbursement Subscription expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108953 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>25.04</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Brookline Bank Mailing Address PO Box 740742 City State Zip Code Chincinnati OH 45274 Purpose of Disbursement Auto expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108957 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>766.15</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**816.23**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Brookline Bank Mailing Address PO Box 740742	<b>Transaction ID:</b> SB17.108958 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 8</div> </div>
City Chincinnati State OH Zip Code 45274 Purpose of Disbursement Auto expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>766.15</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Brookline Bank Mailing Address PO Box 740742 City Chincinnati State OH Zip Code 45274 Purpose of Disbursement Auto expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108959 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>766.15</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) C&G Service Mailing Address 77 L St City South Boston State MA Zip Code 02127 Purpose of Disbursement Auto expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108960 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>235.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**1767.30**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) C&G Service Mailing Address 77 L St	<b>Transaction ID:</b> SB17.108961 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 8</div> </div>
City South Boston State MA Zip Code 02127 Purpose of Disbursement Auto expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>299.37</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) C&G Service Mailing Address 77 L St City South Boston State MA Zip Code 02127 Purpose of Disbursement Auto expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108962 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>227.70</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) C.F. Donovan's Mailing Address 112 Savin Hill Avenue City Dorchester State MA Zip Code 02125 Purpose of Disbursement Catering expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108965 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1228.87</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

1755.94

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Accounting & compliance services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108969

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1876.88

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Accounting & compliance services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108970

Date of Disbursement

/   /

Amount of Each Disbursement this Period

2000.63

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Postage & delivery expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108972

Date of Disbursement

/   /

Amount of Each Disbursement this Period

24.44

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

3901.95

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Accounting & compliance services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108971

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Accounting & compliance services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108973

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Accounting & compliance services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108974

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**6208.13**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Accounting & compliance services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108975

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1650.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Accounting & compliance services

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108976

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1856.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Chick Montana Group

Mailing Address 202 Bonham Road

City State Zip Code  
Dedham MA 02026

Purpose of Disbursement  
Postage & delivery expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.108977

Date of Disbursement

/   /

Amount of Each Disbursement this Period

33.23

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

3539.48

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) City of Boston Excise Tax	<b>Transaction ID:</b> SB17.108979
Mailing Address PO Box 203	Date of Disbursement
City Milford State MA Zip Code 01757	<div> <div>MM / DD / YY</div> <div>01 / 11 / 2008</div> </div>
Purpose of Disbursement Excise tax expense	Amount of Each Disbursement this Period
Candidate Name	<div>863.49</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Filomena Ristorante	<b>Transaction ID:</b> SB17.109102.0
Mailing Address 1063 Wisconsin Ave NW	Date of Disbursement
City Washington State DC Zip Code 20007	<div> <div>MM / DD / YY</div> <div>01 / 16 / 2008</div> </div>
Purpose of Disbursement credit card - Meetings expense	Amount of Each Disbursement this Period
Candidate Name	<div>213.99</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Groundex	<b>Transaction ID:</b> SB17.108990
Mailing Address PO Box 130349	Date of Disbursement
City Boston State MA Zip Code 02113	<div> <div>MM / DD / YY</div> <div>01 / 16 / 2008</div> </div>
Purpose of Disbursement Postage & Delivery expense	Amount of Each Disbursement this Period
Candidate Name	<div>14.12</div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**877.61**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Groundex Mailing Address PO Box 130349	<b>Transaction ID:</b> SB17.108991 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 8</div> </div>
City State Zip Code Boston MA 02113 Purpose of Disbursement Postage & Delivery expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>34.16</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Groundex Mailing Address PO Box 130349 City State Zip Code Boston MA 02113 Purpose of Disbursement Postage & Delivery expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108992 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>14.89</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Groundex Mailing Address PO Box 130349 City State Zip Code Boston MA 02113 Purpose of Disbursement Postage & Delivery expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108993 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div> <div></div> <div>28.97</div> </div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**78.02**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Groundex Mailing Address PO Box 130349	<b>Transaction ID:</b> SB17.108994 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 1 / 2 0 0 8</div> </div>
City State Zip Code Boston MA 02113 Purpose of Disbursement Postage & Delivery expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>29.78</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Groundex Mailing Address PO Box 130349 City State Zip Code Boston MA 02113 Purpose of Disbursement Postage & Delivery expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.108995 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>14.89</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Hyatt Regency Washington Mailing Address 400 New Jersey Ave NW City State Zip Code Washington DC 20001 Purpose of Disbursement credit card - Lodging expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109102.1 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>456.86</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

**44.67**

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Intercontinental	<b>Transaction ID:</b> SB17.108997 <b>Date of Disbursement</b>
Mailing Address 1270 Soldiers Field Rd	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 0 8</div> </div>
City Boston State MA Zip Code 02135	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Catering	<div> <div>116.88</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Kelley, Michael	<b>Transaction ID:</b> SB17.109001 <b>Date of Disbursement</b>
Mailing Address PO Box 38	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 0 8</div> </div>
City Danby State VT Zip Code 05739	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Event music expense	<div> <div>500.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Leahy, David	<b>Transaction ID:</b> SB17.109002 <b>Date of Disbursement</b>
Mailing Address 3 Mt Vernon Street	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 0 8</div> </div>
City Stoneham State MA Zip Code 02180	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Event music expense	<div> <div>500.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**1116.88**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Lori Miller Mailing Address 105 Farragut Rd	<b>Transaction ID:</b> SB17.109003 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 1 / 2 0 0 8</div> </div>
City South Boston State MA Zip Code 02127 Purpose of Disbursement Travel reimbursement Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>400.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Lynch, Daniel Mailing Address 411 West 2nd Street City South Boston State MA Zip Code 02127 Purpose of Disbursement travel reimbursement expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109004 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>604.35</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Merchant Bankcard Mailing Address PO Box 2048 City Simi Valley State CA Zip Code 93062 Purpose of Disbursement Bank fees expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109007 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>2.73</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**1007.08**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Merchant Bankcard

Mailing Address PO Box 2048

City  
Simi Valley

State  
CA

Zip Code  
93062

Purpose of Disbursement

Bank fees expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109006

Date of Disbursement

/   /

Amount of Each Disbursement this Period

73.96

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Merchant Bankcard

Mailing Address PO Box 2048

City  
Simi Valley

State  
CA

Zip Code  
93062

Purpose of Disbursement

Bank fees expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109008

Date of Disbursement

/   /

Amount of Each Disbursement this Period

60.51

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Merchant Bankcard

Mailing Address PO Box 2048

City  
Simi Valley

State  
CA

Zip Code  
93062

Purpose of Disbursement

Bank fees expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109009

Date of Disbursement

/   /

Amount of Each Disbursement this Period

70.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

205.07

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Merchant Bankcard

Mailing Address PO Box 2048

City  
Simi Valley

State  
CA

Zip Code  
93062

Purpose of Disbursement  
Credit card processing fees

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109073

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Metro South Chamber of Commerce

Mailing Address 60 School St

City  
Brockton

State  
MA

Zip Code  
02301

Purpose of Disbursement  
Membership expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109010

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Miller, Lori A.

Mailing Address 105 Farragut Rd

City  
South Boston

State  
MA

Zip Code  
02127

Purpose of Disbursement  
Salary Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109011

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**1403.93**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Miller, Lori A.

Mailing Address 105 Farragut Rd

City State Zip Code  
 South Boston MA 02127

Purpose of Disbursement

Salary Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.109012

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1177.52

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Miller, Lori A.

Mailing Address 105 Farragut Rd

City State Zip Code  
 South Boston MA 02127

Purpose of Disbursement

Salary Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.109013

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1177.52

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Miller, Lori A.

Mailing Address 105 Farragut Rd

City State Zip Code  
 South Boston MA 02127

Purpose of Disbursement

Salary Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

State: District:

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

**Transaction ID:** SB17.109014

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1177.52

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

3532.56

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Miller, Lori A.

Mailing Address 105 Farragut Rd

City  
South Boston

State  
MA

Zip Code  
02127

Purpose of Disbursement

Salary Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109015

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1177.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Miller, Lori A.

Mailing Address 105 Farragut Rd

City  
South Boston

State  
MA

Zip Code  
02127

Purpose of Disbursement

Salary Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109016

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1177.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Miller, Lori A.

Mailing Address 105 Farragut Rd

City  
South Boston

State  
MA

Zip Code  
02127

Purpose of Disbursement

Salary Expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2006  
☐ Primary ☒ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109017

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1177.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

3532.56

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Nick Zaferakis

Mailing Address 824 East Third St

City State Zip Code  
 South Boston MA 02127

Purpose of Disbursement  
 Travel reimbursement expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109020

Date of Disbursement

/   /

Amount of Each Disbursement this Period

219.25

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Norfolk & Dedham Mutual Fire Insurance Co

Mailing Address c/o The Norfolk & Dedham Group PO

City State Zip Code  
 Woburn MA 01888

Purpose of Disbursement  
 Insurance expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109021

Date of Disbursement

/   /

Amount of Each Disbursement this Period

669.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Norfolk & Dedham Mutual Fire Insurance Co

Mailing Address c/o The Norfolk & Dedham Group PO

City State Zip Code  
 Woburn MA 01888

Purpose of Disbursement  
 Insurance expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109022

Date of Disbursement

/   /

Amount of Each Disbursement this Period

675.33

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1563.58

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Norfolk & Dedham Mutual Fire Insurance Co

Mailing Address c/o The Norfolk & Dedham Group PO

City Woburn State MA Zip Code 01888

Purpose of Disbursement  
Insurance expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109023

Date of Disbursement

/   /

Amount of Each Disbursement this Period

675.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address PO Box 940459

City Chicago State IL Zip Code 60696

Purpose of Disbursement  
Payroll tax expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109027

Date of Disbursement

/   /

Amount of Each Disbursement this Period

460.86

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address PO Box 940459

City Chicago State IL Zip Code 60696

Purpose of Disbursement  
Payroll tax expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109028

Date of Disbursement

/   /

Amount of Each Disbursement this Period

116.52

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1252.71

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address PO Box 940459

City  
Chicago

State  
IL

Zip Code  
60696

Purpose of Disbursement

Payroll tax expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109029

Date of Disbursement

/   /

Amount of Each Disbursement this Period

514.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address PO Box 940459

City  
Chicago

State  
IL

Zip Code  
60696

Purpose of Disbursement

Payroll tax expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109035

Date of Disbursement

/   /

Amount of Each Disbursement this Period

56.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address PO Box 940459

City  
Chicago

State  
IL

Zip Code  
60696

Purpose of Disbursement

Payroll tax expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109030

Date of Disbursement

/   /

Amount of Each Disbursement this Period

514.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1085.84

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address PO Box 940459

City  
Chicago

State  
IL

Zip Code  
60696

Purpose of Disbursement

Payroll tax expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109031

Date of Disbursement

/   /

Amount of Each Disbursement this Period

294.33

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address PO Box 940459

City  
Chicago

State  
IL

Zip Code  
60696

Purpose of Disbursement

Payroll tax expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109032

Date of Disbursement

/   /

Amount of Each Disbursement this Period

514.92

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Paychex

Mailing Address PO Box 940459

City  
Chicago

State  
IL

Zip Code  
60696

Purpose of Disbursement

Payroll tax expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109033

Date of Disbursement

/   /

Amount of Each Disbursement this Period

511.11

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1320.36

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 940459	<b>Transaction ID:</b> SB17.109034 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 0 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60696 Purpose of Disbursement Payroll tax expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>106.52</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 940459 City Chicago State IL Zip Code 60696 Purpose of Disbursement Payroll tax expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.109036 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 0 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>79.68</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 940459 City Chicago State IL Zip Code 60696 Purpose of Disbursement Payroll tax expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.109037 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 4 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>502.74</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**688.94**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 940459	<b>Transaction ID:</b> SB17.109038 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 0 8</div> </div>
City Chicago State IL Zip Code 60696 Purpose of Disbursement Payroll tax expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Amount of Each Disbursement this Period</b> <div>496.34</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Paychex Mailing Address PO Box 940459 City Chicago State IL Zip Code 60696 Purpose of Disbursement Payroll tax expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.109039 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 3 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>116.35</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Robert J. Fowkes Mailing Address 26 Miller St City Braintree State MA Zip Code 02184 Purpose of Disbursement Event music expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District: Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼	<b>Transaction ID:</b> SB17.109042 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 8 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>500.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**1112.69**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Sage Systems LLC

Mailing Address PO Box 2201

City  
Peabody

State  
MA

Zip Code  
01960

Purpose of Disbursement  
Webhosting and maintenancer expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109043

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Sage Systems LLC

Mailing Address PO Box 2201

City  
Peabody

State  
MA

Zip Code  
01960

Purpose of Disbursement  
Webhosting and maintenancer expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109044

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Sage Systems LLC

Mailing Address PO Box 2201

City  
Peabody

State  
MA

Zip Code  
01960

Purpose of Disbursement  
Computer expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109045

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**2155.97**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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Detailed Summary Page

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Sage Systems LLC

Mailing Address PO Box 2201

City  
Peabody

State  
MA

Zip Code  
01960

Purpose of Disbursement  
Computer expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109046

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

South Boston Tribune

Mailing Address PO Box 6

City  
South Boston

State  
MA

Zip Code  
02127

Purpose of Disbursement  
Advertising expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109047

Date of Disbursement

/   /

Amount of Each Disbursement this Period

260.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

South Boston Tribune

Mailing Address PO Box 6

City  
South Boston

State  
MA

Zip Code  
02127

Purpose of Disbursement  
Advertising expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109048

Date of Disbursement

/   /

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

1760.00

**TOTAL** This Period (last page this line number only) .....



**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

South Boston Tribune

Mailing Address PO Box 6

City

South Boston

State

MA

Zip Code

02127

Purpose of Disbursement

Advertising expense

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

2008

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.109049

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	3	1	/	2	0	0	8

Amount of Each Disbursement this Period

65.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**B.**

Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address PO Box 1769

City

Newark

State

NJ

Zip Code

07101

Purpose of Disbursement

Telephone expense

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

2008

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.109051

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	1	6	/	2	0	0	8

Amount of Each Disbursement this Period

161.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53
**C.**

Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address PO Box 1769

City

Newark

State

NJ

Zip Code

07101

Purpose of Disbursement

Telephone expense

Candidate Name

Category/  
Type

Office Sought:

☐ House☐ Senate☐ President

Disbursement For:

2008

☒ Primary☐ General☐ Other (specify) ▼

State:

District:

Transaction ID: SB17.109052

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	5	/	2	0	0	8

Amount of Each Disbursement this Period

161.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

387.64

TOTAL This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
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<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Sprint PCS

Mailing Address PO Box 1769

City  
NewarkState  
NJZip Code  
07101Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109053

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	2	1	/	2	0	0	8

Amount of Each Disbursement this Period

161.32

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

Stapleton Floral

Mailing Address 635 East Broadway Street

City  
South BostonState  
MAZip Code  
02127Purpose of Disbursement  
Flower expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109056

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	1	1	/	2	0	0	8

Amount of Each Disbursement this Period

90.75

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**

Full Name (Last, First, Middle Initial)

Stapleton Floral

Mailing Address 635 East Broadway Street

City  
South BostonState  
MAZip Code  
02127Purpose of Disbursement  
Flower expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109057

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3	/	0	5	/	2	0	0	8

Amount of Each Disbursement this Period

328.25

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

580.32

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Tiny Prints	<b>Transaction ID:</b> SB17.109102.2 <b>Date of Disbursement</b>
Mailing Address 520 San Antonio Road	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 6 / 2 0 0 8</div> </div>
City Mountain View State CA Zip Code 94040	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement credit card - Printing expense	<div> <div>622.00</div> <div> <input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53         </div> </div>
Candidate Name	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) U.S. House of Representatives Gift Shop	<b>Transaction ID:</b> SB17.109102.3 <b>Date of Disbursement</b>
Mailing Address U.S. Capitol	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 6 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20001	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement credit card - Gifts for constituents	<div> <div>280.00</div> <div> <input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53         </div> </div>
Candidate Name	<div> <div>Category/Type</div> <div>[MEMO ITEM]</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Union Print Works	<b>Transaction ID:</b> SB17.109061 <b>Date of Disbursement</b>
Mailing Address 1193 River Street PO Box 366205	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 0 5 / 2 0 0 8</div> </div>
City Hyde Park State MA Zip Code 02136	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Printing expense	<div> <div>1736.55</div> <div> <input type="checkbox"/> Refund or Disposal of Excess            Contributions Required Under            11 C.F.R. 400.53         </div> </div>
Candidate Name	<div> <div>Category/Type</div> </div>
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

1736.55

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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(check only one)

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) United States Treasury	<b>Transaction ID:</b> SB17.109062 <b>Date of Disbursement</b>
Mailing Address Internal Revenue Service	<div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 6 / 2 0 0 8</div> </div>
City Ogden State UT Zip Code 84201	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Income tax expense	<div> <div>5968.00</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> SB17.109067 <b>Date of Disbursement</b>
Mailing Address PO Box 15041	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 0 8</div> </div>
City Worcester State MA Zip Code 01615	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Telephone expense	<div> <div>111.85</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon Wireless	<b>Transaction ID:</b> SB17.109068 <b>Date of Disbursement</b>
Mailing Address PO Box 15041	<div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 2 6 / 2 0 0 8</div> </div>
City Worcester State MA Zip Code 01615	<b>Amount of Each Disbursement this Period</b>
Purpose of Disbursement Telephone expense	<div> <div>113.56</div> </div>
Candidate Name	<input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President State: District:	Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

**SUBTOTAL** of Disbursements This Page (optional) .....

**6193.41**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 15041	<b>Transaction ID:</b> SB17.109069 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 2 6 / 2 0 0 8</div> </div>
City Worcester State MA Zip Code 01615 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>111.42</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Verizon Wireless Mailing Address PO Box 15041 City Worcester State MA Zip Code 01615 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109070 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>122.83</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Verizon-B Mailing Address PO Box 1 City Worcester State MA Zip Code 01654 Purpose of Disbursement Telephone expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109063 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 0 7 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>163.94</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**398.19**

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Verizon-B

Mailing Address PO Box 1

City  
WorcesterState  
MAZip Code  
01654Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109064

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1		3	0		2	0	0	8

Amount of Each Disbursement this Period

112.66

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

Verizon-B

Mailing Address PO Box 1

City  
WorcesterState  
MAZip Code  
01654Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109065

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		2	1		2	0	0	8

Amount of Each Disbursement this Period

113.09

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**

Full Name (Last, First, Middle Initial)

Verizon-B

Mailing Address PO Box 1

City  
WorcesterState  
MAZip Code  
01654Purpose of Disbursement  
Telephone expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109066

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		3	1		2	0	0	8

Amount of Each Disbursement this Period

115.53

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

341.28

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)  
 Visa

Mailing Address PO Box 30131

City Tampa State FL Zip Code 33630

Purpose of Disbursement  
 credit card statement (see memo)

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109097

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)  
 Filomena Ristorante

Mailing Address 1063 Wisconsin Ave NW

City Washington State DC Zip Code 20007

Purpose of Disbursement  
 credit card - Meetings expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109097.0

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**[MEMO ITEM]**

**C.**

Full Name (Last, First, Middle Initial)  
 Hyatt Regency Washington

Mailing Address 400 New Jersey Ave NW

City Washington State DC Zip Code 20001

Purpose of Disbursement  
 credit card - Lodging expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109097.1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

**1572.85**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Tiny Prints Mailing Address 520 San Antonio Road	<b>Transaction ID:</b> SB17.109097.2 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 6 / 2 0 0 8</div> </div>
City State Zip Code Mountain View CA 94040 Purpose of Disbursement credit card - Printing expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>622.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) U.S. House of Representatives Gift Shop Mailing Address U.S. Capitol City State Zip Code Washington DC 20001 Purpose of Disbursement credit card - Gifts for constituents Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109097.3 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 1 / 1 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>280.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) Visa Mailing Address PO Box 30131 City State Zip Code Tampa FL 33630 Purpose of Disbursement credit card statement (see memo) Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109107 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>1829.98</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**1829.98**

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
U.S. House of Representatives Gift Shop

Mailing Address U.S. Capitol

City Washington State DC Zip Code 20001

Purpose of Disbursement  
credit card - Gifts for constituents

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109107.0

Date of Disbursement

/   /

Amount of Each Disbursement this Period

55.68

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Ruth's Chris Steakhouse

Mailing Address 1801 Connecticut, N.W.

City Washington State DC Zip Code 20009

Purpose of Disbursement  
credit card - Meetings expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109107.1

Date of Disbursement

/   /

Amount of Each Disbursement this Period

282.60

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
U.S. House of Representatives Gift Shop

Mailing Address U.S. Capitol

City Washington State DC Zip Code 20001

Purpose of Disbursement  
credit card - Gifts for constituents

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109107.3

Date of Disbursement

/   /

Amount of Each Disbursement this Period

63.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Legal Sea Foods Mailing Address 2020 K St NW	<b>Transaction ID:</b> SB17.109107.4 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div>
City Washington State DC Zip Code 20006 Purpose of Disbursement credit card - Meetings expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>287.75</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>B.</b> Full Name (Last, First, Middle Initial) U.S. House of Representatives Gift Shop Mailing Address U.S. Capitol City Washington State DC Zip Code 20001 Purpose of Disbursement credit card - Gifts for constituents Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109107.5 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>304.14</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>
<b>C.</b> Full Name (Last, First, Middle Initial) U.S. House of Representatives Gift Shop Mailing Address U.S. Capitol City Washington State DC Zip Code 20001 Purpose of Disbursement credit card - Gifts for constituents Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB17.109107.6 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 1 5 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>59.78</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53 <b>[MEMO ITEM]</b>

**SUBTOTAL** of Disbursements This Page (optional) ..... ►

0.00

**TOTAL** This Period (last page this line number only) ..... ►

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
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☐ 20a ☐ 20b ☐ 20c ☐ 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.** Full Name (Last, First, Middle Initial)  
U.S. House of Representatives Gift Shop

Mailing Address U.S. Capitol

City Washington State DC Zip Code 20001

Purpose of Disbursement  
credit card - Gifts for constituents

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109107.7

Date of Disbursement

/   /

Amount of Each Disbursement this Period

113.04

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**B.** Full Name (Last, First, Middle Initial)  
Davio's Boston

Mailing Address 269 Newbury St

City Boston State MA Zip Code 02116

Purpose of Disbursement  
credit card - Catering expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109107.8

Date of Disbursement

/   /

Amount of Each Disbursement this Period

497.10

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**C.** Full Name (Last, First, Middle Initial)  
U.S. House of Representatives Gift Shop

Mailing Address U.S. Capitol

City Washington State DC Zip Code 20001

Purpose of Disbursement  
credit card - Gifts for constituents

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB17.109107.9

Date of Disbursement

/   /

Amount of Each Disbursement this Period

136.84

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**[MEMO ITEM]**

**SUBTOTAL** of Disbursements This Page (optional) .....

0.00

**TOTAL** This Period (last page this line number only) .....

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input checked="" type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Visa

Mailing Address PO Box 30131

City  
TampaState  
FLZip Code  
33630Purpose of Disbursement  
credit card statement (see memo)

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109118

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	8

Amount of Each Disbursement this Period

105.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

U.S. House of Representatives Gift Shop

Mailing Address U.S. Capitol

City  
WashingtonState  
DCZip Code  
20001Purpose of Disbursement  
credit card - Gifts for constituents

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109118.0

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		1	1		2	0	0	8

Amount of Each Disbursement this Period

105.36

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**[MEMO ITEM]****C.**

Full Name (Last, First, Middle Initial)

W. B. Mason

Mailing Address 59 Centre Street PO Box 111

City  
BrocktonState  
MAZip Code  
02303Purpose of Disbursement  
Office supplies expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB17.109071

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	3		0	5		2	0	0	8

Amount of Each Disbursement this Period

87.11

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

192.47

TOTAL This Period (last page this line number only) .....

59459.61

**SCHEDULE B (FEC Form 3)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Allied War Veterans Banquet

Mailing Address c/o Ed Shifflett, Chairman 109 Edg

City Braintree State MA Zip Code 02184

Purpose of Disbursement

Event tickets

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.108935

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	2	6	/	2	0	0	8

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**B.**

Full Name (Last, First, Middle Initial)

Boys &amp; Girls Clubs of Boston

Mailing Address Attn: Harry Duvall, Ex. Dir. 230 W

City South Boston State MA Zip Code 02127

Purpose of Disbursement

Charitable expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.108955

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2	/	0	6	/	2	0	0	8

Amount of Each Disbursement this Period

500.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53**C.**

Full Name (Last, First, Middle Initial)

Brockton Area Branch NAACP

Mailing Address MLK Breakfast PO Box 1535

City Brockton State MA Zip Code 02303

Purpose of Disbursement

Charitable ticket expense

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.108956

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	1	/	0	7	/	2	0	0	8

Amount of Each Disbursement this Period

175.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

925.00

TOTAL This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

C. Forbes Inc.

Mailing Address 12830 West Creek Parkway Suite J

City Richmond State VA Zip Code 23238

Purpose of Disbursement  
Commemorative gifts for servicemen

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.108963

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1084.34

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

C. Forbes Inc.

Mailing Address 12830 West Creek Parkway Suite J

City Richmond State VA Zip Code 23238

Purpose of Disbursement  
Commemorative gifts for servicemen

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.108964

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1082.58

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Democratic Congressional Campaign Cte.

Mailing Address 430 S Capitol St SE

City Washington State DC Zip Code 20003

Purpose of Disbursement  
Txfr of excess campaign funds

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.108981

Date of Disbursement

/   /

Amount of Each Disbursement this Period

25000.00

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

27166.92

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Emerson Fire Victims Fundraiser

Mailing Address Mt. Washington Bank 708 East Broad

City State Zip Code  
 South Boston MA 02127

Purpose of Disbursement  
 Charitable expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.108982

Date of Disbursement

/   /

Amount of Each Disbursement this Period

300.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Emma's Hope for a Cure

Mailing Address c/o The NephCure Foundation 15 Wat

City State Zip Code  
 Berwyn PA 19312

Purpose of Disbursement  
 Charitable contribution expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.108983

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

Friends of Dedham Civic Pride, Inc.

Mailing Address 202 Bonham Rd

City State Zip Code  
 Dedham MA 02026

Purpose of Disbursement  
 Charitable contribution

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.108985

Date of Disbursement

/   /

Amount of Each Disbursement this Period

250.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

800.00

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.**

Full Name (Last, First, Middle Initial)

Gate of Heaven School

Mailing Address 609 East 4th St

City State Zip Code  
 South Boston MA 02127

Purpose of Disbursement  
 Charitable expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.108987

Date of Disbursement

/   /

Amount of Each Disbursement this Period

225.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**B.**

Full Name (Last, First, Middle Initial)

Joe Donnell for Congress

Mailing Address PO Box 1961

City State Zip Code  
 South Bend IN 46634

Purpose of Disbursement  
 Federal contribution expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.108998

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**C.**

Full Name (Last, First, Middle Initial)

John Yarmuth for Congress

Mailing Address 1819 Brownsboro Rd

City State Zip Code  
 Louisville KY 40206

Purpose of Disbursement  
 Federal contribution expense

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

**Transaction ID:** SB21.109000

Date of Disbursement

/   /

Amount of Each Disbursement this Period

1000.00

☐ Refund or Disposal of Excess  
 Contributions Required Under  
 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

2225.00

**TOTAL** This Period (last page this line number only) .....



# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

PAGE 113 / 115

☐ 17 ☐ 18 ☐ 19a ☐ 19b  
☐ 20a ☐ 20b ☐ 20c ☒ 21

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NAME OF COMMITTEE (In Full)  
 Stephen F. Lynch for Congress Committee

<b>A.</b> Full Name (Last, First, Middle Initial) Parkway Girls Softball League, Inc. Mailing Address PO Box 320354	<b>Transaction ID:</b> SB21.109024 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 2 1 / 2 0 0 8</div> </div>
City State Zip Code West Roxbury MA 02132 Purpose of Disbursement Charitable contribution expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Amount of Each Disbursement this Period</b> <div>250.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>B.</b> Full Name (Last, First, Middle Initial) Parkway Little League Mailing Address PO Box 320152 City State Zip Code West Roxbury MA 02132 Purpose of Disbursement League sponsorship Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21.109025 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 3 / 1 1 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>350.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53
<b>C.</b> Full Name (Last, First, Middle Initial) Research Foundation For Ovarian Cancer Mailing Address c/o Johanna Grealish 58 Cliff Drive City State Zip Code North Attleboro MA 02760 Purpose of Disbursement Charitable contribution expense Candidate Name Office Sought: <input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President Disbursement For: 2008 <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼ State: District:	<b>Transaction ID:</b> SB21.109041 <b>Date of Disbursement</b> <div> <div>M M / D D / Y Y Y Y</div> <div>0 2 / 0 6 / 2 0 0 8</div> </div> <b>Amount of Each Disbursement this Period</b> <div>375.00</div> <input type="checkbox"/> Refund or Disposal of Excess Contributions Required Under 11 C.F.R. 400.53

**SUBTOTAL** of Disbursements This Page (optional) .....

**975.00**

**TOTAL** This Period (last page this line number only) .....

# **SCHEDULE B (FEC Form 3)** **ITEMIZED DISBURSEMENTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER:  
(check only one)

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<input type="checkbox"/> 17	<input type="checkbox"/> 18	<input type="checkbox"/> 19a	<input type="checkbox"/> 19b
<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input checked="" type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

A.

Full Name (Last, First, Middle Initial)

St. Patrick's Day Parade

Mailing Address PO Box 351

City  
South Boston

State  
MA

Zip Code  
02127

Purpose of Disbursement  
Band sponsorship fee

Candidate Name

Category/  
Type

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

State: District:

Transaction ID: SB21.109054

Date of Disbursement

M	M	/	D	D	/	Y	Y	Y	Y
0	2		2	6		2	0	0	8

Amount of Each Disbursement this Period

1000.00
---------

☐ Refund or Disposal of Excess  
Contributions Required Under  
11 C.F.R. 400.53

SUBTOTAL of Disbursements This Page (optional) .....

1000.00

TOTAL This Period (last page this line number only) .....

33091.92

**SCHEDULE D (FEC Form 3)****DEBTS AND OBLIGATIONS****Excluding Loans**(Use separate  
schedule(s)  
for each  
numbered line)

PAGE 115 / 115

FOR LINE NUMBER:  
(check only one)☒ 9  
☐ 10

NAME OF COMMITTEE (In Full)

Stephen F. Lynch for Congress Committee

**A.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Daniel J HurleyNature of Debt (Purpose):  
Misappropriated funds

Mailing Address 76 G Street

City State ZIP Code  
South Boston MA 02127

Outstanding Balance Beginning This Period

25053.00

Transaction ID: SD9.47

Amount Incurred This Period

0.00

Payment This Period

3000.00

Outstanding Balance at Close of This Period

22053.00

**B.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon Political AccountsNature of Debt (Purpose):  
Deposit for phone lines

Mailing Address 5 Davis Farm Road

City State ZIP Code  
Portland ME 04103

Outstanding Balance Beginning This Period

350.00

Transaction ID: SD9.11

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

350.00

**C.** Full Name (Last, First, Middle Initial) of Debtor or Creditor  
Verizon Political AccountsNature of Debt (Purpose):  
Deposit for phone lines

Mailing Address 5 Davis Farm Road

City State ZIP Code  
Portland ME 04103

Outstanding Balance Beginning This Period

1400.00

Transaction ID: SD9.25

Amount Incurred This Period

0.00

Payment This Period

0.00

Outstanding Balance at Close of This Period

1400.00

1) **SUBTOTALS** This Period This Page (optional).....

23803.00

2) **TOTALS** This Period (last page this line number only).....

23803.00

3) **TOTAL OUTSTANDING LOANS** from Schedule C (last page only).....

0.00

4) **ADD 2) and 3)** and carry forward to appropriate line of Summary Page (last page only)

23803.00